BEST AVAILABLE COPY

Application or Docket Number											per		
PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 16 791 (.0.3000)											®6)		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			27_					ATE .	FEE		RATE	FEE	
FOR			NUMBER FILEO		NUMBER EXTRA		BAS	C FEE	375.00	OR	Basic Fie	750.00	
TOTAL CHARGEABLE CLAIMS			27 minus 20=		*2		X	9=		OR	X\$18=	36.	
IND	EPENDENT CL	₩ minus 3 =		* -1		X42=			OR:	X84=	W.		
MUI	TIPLE DEPEN	DENT CLAIM PE	RESENT				+140=						
* If the difference in column 1 is less than zero, enter "0" in co						olumn 2	<u> </u>			OR	+280=	CFF	
								TAL		OR	TOTAL	870 THAN	
.	1-7-05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)						SN	SMALL ENTITY			SMALL		
NTA		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ID W	Total:	34	Minus	* de	2	-12	X	§ 9=	·	OR	X\$18=	600	
AMENDMENT	Independent	. 9	Minus	*4*	4	=5	X	42=		OR	200 X84=	1000.00	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	r CLAIM			40=			+280=	00000	
								TOTAL		OR		said	
4	(Column 1) (Column 2) (Column 3)							ADDIT. FEE OR ADDIT. FEE PAID					
		(Column 1)		HIGH		(Column 3)		- 1 1- - 1 1 1 1 1 1-	AODI			ADOI-	
IMENDAMENT B		REMAINING AFTER AMENDMENT		PREVI	BER OUSLY: FOR	PRESENT EXTRA	A.	ATE	TIONAL FEE		RATE	TIONAL PEE	
	libial	*	Minus	**		. =	X	9≐		OR	X\$18=		
	Independent		Minus	***		=	X	42=		OR	X84=	.7 4	
	FIRST PRESE	NTATION OF M	JLTIPLE DEPENDENT CLAIM:					40-			+280=		
			·					40=	<u> </u>	OR	TOTAL	-	
		ADD	T. FEE	<u> </u>	OR	ADDIT. FEE							
	(Column 1) (Column 2) (Column 3)							مارس المساودي المساود					
AMENDAMENT C		CLAMAS REMAINING AFTER LAMENOMENT		NUN PREVI	ABER HOUSLY FOR	PRESENT	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
1	Total	*	Minus	**		=	X	\$ 9=		OR.	X\$18=		
1	Independent		Minus	***		=	-	42=			V04-		
Y	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
+140=										OR	+280=	No. of the last	
# If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ## If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. F													
	The Highest Nur.	imber Previously I mber Previously Pr	ald For" (Total o	r Indepen	is less in deni) is th	an 3, enter "3." e highest numb				in o	otum n.1 .		